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SENSITIVE
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SUBJECT: UNIDENTIFIED DISEASE HAS KILLED 160 IN WEST KASAI

¶1. (SBU) Summary. An unidentified disease has killed 160 of the 352 people who have contracted it since June 7 in seven remote villages of Kasai Occidental (West Kasai) province in central DRC. Samples have been collected and are being analyzed inside and outside the DRC. Initial indications that this might be typhoid fever are now in question because of the highly contagious and lethal nature of the illness. International assistance has been extended and more is available if need be. End summary.

¶2. (SBU) 160 people have died from an unidentified disease in seven villages in central DRC. The villages, with a little more than 16,000 inhabitants, are located 70 kms (43 miles) south of Mweka (on the main rail line between provincial capital Kananga and river port Ilebo) near the town of Luebo. Reports of the disease began after the death of one village's traditional chief was followed a week later by the death of his successor and others who had attended the funeral. Provincial medical authorities reacted after an August 18 report by local health clinic personnel that 46 people had died in two of the villages. The villagers had not attempted to access the health clinics, the option of last resort due to the high cost and low quality of care. On August 21, provincial authorities from Kananga went to the site and found that a total of 82 deaths had been recorded, but only 19 from among the 120 individuals who sought medical attention. Symptoms included fever, headache, diarrhea and vomiting, with no/no mention of bleeding or respiratory distress.

¶3. (SBU) From August 22-27, 97 more cases and 21 deaths were recorded. On August 28, similar cases were found in Luebo (eight cases, two deaths), Benaleka (eight cases) and Mweka (four deaths). DRC health officials said initially that the deaths were probably due to dehydration caused by typhoid fever, a bacterial disease spread by contaminated water or food, but later said that a viral cause could not be excluded, given the highly contagious and lethal nature of the illness. (Note: One report said that five members of the same family had died in one village. End note.) A report released by the DRC Ministry of Health (MOH) and shared with WHO and CDC in Kinshasa noted that there have been hundreds of cases of typhoid fever in Kinshasa, in Bandundu province, and in Luebo since February 2007, but only a few related deaths. The report also stated that there were unexplained chicken, duck, pig and goat die-offs during the months of April and May 2007 in these same villages.

¶4. (SBU) MOH epidemiologists collected samples in the field August 31 - September 1 and brought these back for analysis in Kinshasa (at the National Institute for Biomedical Research, INRB) and in testing facilities overseas, including CDC Atlanta. (Note: Initial results of these first samples tested at INRB showed only shigella bacteria in one of the

seven samples. End note.) CDC has sent samples to Atlanta, including samples collected by an American physician who obtained them directly from victims in Mweka. Possible causal agents include shigellosis, hemorrhagic fever, gastro-intestinal anthrax, and typhoid fever. The MOH has requested and is receiving assistance from WHO, MSF Belgium, and others. MOH has been offered, and accepted, technical assistance from CDC/Atlanta in case the samples indicate a causal agent requiring CDC expertise, or in case no causal agent can be immediately determined.

15. (SBU) The current toll stands at 352 human cases with 160 deaths, up from late August estimates of 249 cases and 116 deaths. There have been no further reports of bird or animal die-offs. Human symptoms, especially the absence of any respiratory problems, do not indicate avian influenza of any kind. A consular warden message cautioning American citizens about this mysterious outbreak has been issued.
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